PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10626599

								(0)000011					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS							Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		* <i>M</i>			X\$ 9=		OR	X\$18=	7	
INDEPENDENT CLAIMS			mir	nus 3 =	* Ø		Ì	X42=		OR	X84=	/	
MULTIPLE DEPENDENT CLAIM P			RESENT				ŀ	+140=			+280=		
* If the difference in column 1 is less than zero, ento					r "0" in o	column 2	Ĺ	TOTAL		OR	TOTAL	701	
CLAIMS AS AMENDED - PART II								101AL		OR	OTHER	770 THAN	
(Column 1)			(Column 2)			(Column 3)	_	SMALL	ENTITY	OR	SMALL	I	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	*	Minus	**		=	1 1	X\$ 9=		OR	X\$18≈		
	Independent	*	Minus	***		=		X42=		OR	X84=		
Ù	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ן נ	+140=		OR	+280≃		
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)		10011.1 CE			7,0011.722		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	i	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=]]	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	T CL AIM]=	4 [X42=		OR	X84=		
L	PIROT PRESE	NTATION OF W	OLITPLE DEF	ENDEN	CLAIM	<u></u>	- [+140=		OR	+280=		
							,	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2) HEST	(Column 3)	<u> </u>						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* '	Minus	**		=] [X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		<u> -</u>		X42=		OR	X84=	·	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIN	1	┧╽	+140=	<u></u>		4000		
,*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													